24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

SCHEDULE E)	PAGE 1 OF 2 FOR SE OF FORM 24/48
NAME OF COMMITTE (In Full)	FEC IDENTIFICATION NUMBER ▼
Conservative Campaign Committee	C C00495010
Check If X 24-hour report 48-hour report New report Amends report filed on	M = M / D = D / Y = Y = Y
T	
Full Name (Last, First, Middle Initial) of Payee Townsquare Media	e M M / D D / Y Y Y Y
Mailing Address 109 Walters Avenue	09 24 2013
Ame	ount
City State Zip Code Ewing NJ 08638-1829	2858.13
Purpose of Expenditure Office Sou	
Name of Federal Candidate Supported or Opposed by Expenditure:	Senate District: 00 President
Steve Lonegan Check Or	ne: Support Oppose
Calendar Year-To-Date Per Election for Office Sought Disbursen	nent For: Primary General Other (specify)
Full Name (Last, First, Middle Initial) of Payee Date	e
Townsquare Media	09
Mailing Address 109 Walters Avenue	ount
	out.
Ewing NJ 08638-1829	2858.12 saction ID : 82204
Purpose of Expenditure 9/26-9/27 Radio Advertising Category/ Type Office Soi	Senate District:
Name of Federal Candidate Supported or Opposed by Expenditure: Cory Booker Check Or	President Support Oppose
Calendar Year-To-Date Per Election for Office Sought Disbursen 2858.12	nent For: Primary General Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	5716.25
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.	
Kelly Lawler [Electronically Filed] Date 09	24 2013
Signature	

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: 97 'A = G7 9 @ G B9 CI G'H9 LH'F9 @ 5 H98 'HC'5 'F9 DCF HZ G7 < 98 I @ 'CF' + H9 A = N5 H= CB

Form/Schedule: F24N Transaction ID:

To report Expenditures for Special Election being held 10/16/2013 in NJ

Form/Schedule: Transaction ID: